October 2012
Client Benefit Limit Inquiry

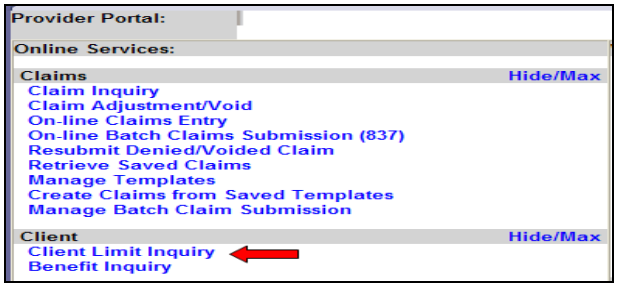
The Agency may limit certain covered services by quantity, frequency, or duration. The Agency's payment system, ProviderOne, has been updated to allow providers to check the system to see if the client is eligible for the services that have these limitations. Providers can review their program specific Medicaid Provider Guides to see if the service to be provided has one of these limitations.

ProviderOne allows providers to check service limits using claim data stored in ProviderOne. This system functionality is limited to claims that have been paid by ProviderOne and does not account for claims that have been received but are still in process or have been denied. There is also the possibility that services have been incurred but have not been billed yet.

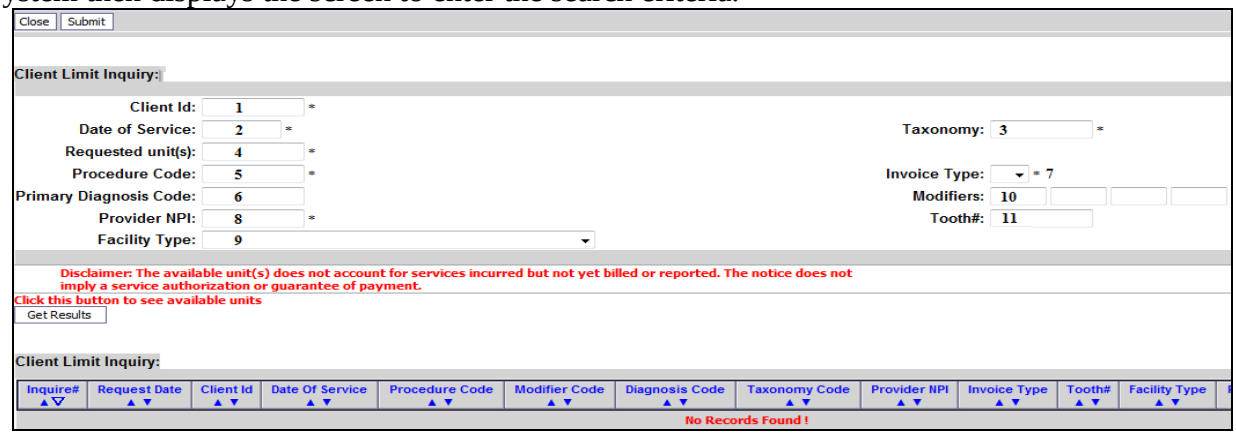
The process to check the service limits feature starts by logging into ProviderOne.

- Use one of the following profiles
  - **EXT Provider Super User**
  - **EXT Provider Claims Submitter**
  - **EXT Provider Eligibility Checker**
  - **EXT Provider Eligibility Checker-Claims Submitter**

- Select the **Client Limit Inquiry** hyperlink:



The system then displays the screen to enter the search criteria.



1. Client ID number
2. Date of Service (when you are planning a visit/service; future dates accepted)
3. Taxonomy code of the Billing Provider
4. Requested unit (s) (requires at least one or enter the amount to be supplied)
5. Procedure Code
6. Primary Diagnosis Code (if procedure code requires)
7. Invoice Type (claim form type)
   - **D** = Dental
   - **P** = Professional
   - **I** = Institutional
8. Provider NPI (Prepopulated)
9. Facility Type (place of service if procedure code requires)
10. Modifiers (if the service has a specific modifier)
11. Tooth Number (if dental service requires a tooth)

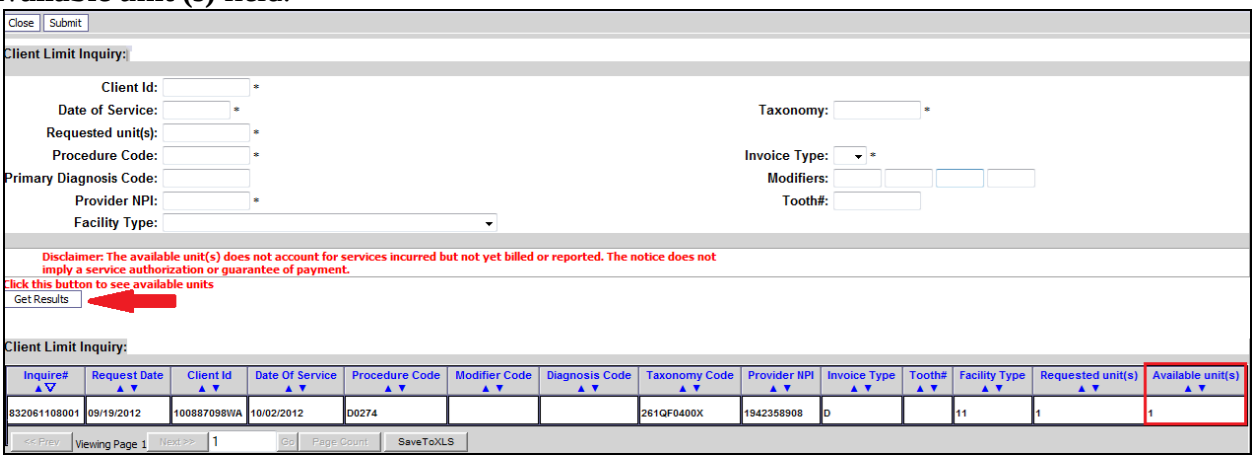
At the Client Limit Inquiry screen fill in the fields marked required with the asterisk *****.

Click on the "**Submit**" button once the required data fields are filled. The system clears the data boxes and displays the entries as if a line of code for a claim.

The actual limit inquiry is processing in the background so the **Available unit(s)** box does not have an entry. Wait a short time then click on the Get Results button to see the results of the limit inquiry.

> **Note:** If the **Available unit(s)** box remains empty click on the **Get Results** button again as it may take ProviderOne a few seconds to complete the data base inquiry.

Once the inquiry is complete ProviderOne will display this screen with a value populated in the **Available unit (s)** field:



If there are available units, the system will display the number of units available.

> Note:
> **Disclaimer: The available unit(s) does not account for services incurred but not yet billed or reported. The notice does not imply a service authorization or guarantee of payment.**

The system returns are viewed in the **Available unit(s)** box with only 2 messages:

- The Available unit (s) is a "**1**" or more, means there are units available for the service; or
- The Available unit (s) is a "**0**" means the service limit has been met for the search criteria.

If a "**0**" is returned, providers should review their program specific Medicaid Provider Guide to see if some form of authorization is an option to continue this treatment.

> **Hint for Vision Providers:** Use one of the exam codes or fitting fee codes as the search criteria not one of the hardware codes.

Other Reasons ProviderOne may return a "zero":

- The client is enrolled in a health plan, Managed Care Plan, or is QMB-Only, etc. which means that no units are available through Medicaid fee for service.
- Is the client currently eligible?
- Is the billing provider taxonomy correct for the procedure code and is the taxonomy used listed on this provider's file in ProviderOne?
- Is the diagnosis code used correct for this procedure (if applicable)?
- Is the modifier used correct for this procedure (if applicable)?

Be sure to verify all data used in the search criteria.